

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

SHORE PAC

ADDRESS (number and street)

PO Box 3157

☐Check if different  
than previously  
reported. (ACC)

Long Branch

NJ

07740

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00410308

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☒

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

09

01

2010

through

09

30

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Warren B Goode

Signature of Treasurer

Electronically Filed by Warren B Goode

Date

10

20

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 15

Write or Type Committee Name  
SHORE PAC

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	8881.42
(b) Cash on Hand at Beginning of Reporting Period .....	13835.78	
(c) Total Receipts (from Line 19) .....	29653.58	47153.58
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	43489.36	56035.00
7. Total Disbursements (from Line 31) .....	29203.58	41749.22
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	14285.78	14285.78
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name  
SHORE PAC

Report Covering the Period:

From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	10653.58	10653.58
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	10653.58	10653.58
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	19000.00	36500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	29653.58	47153.58
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	29653.58	47153.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	29653.58	47153.58

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	3203.58	12999.22	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	3203.58	12999.22	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26000.00	26000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	2750.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	29203.58	41749.22	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29203.58	41749.22	

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 15

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	29653.58	47153.58
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29653.58	47153.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3203.58	12999.22
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3203.58	12999.22

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SHORE PAC

**A.**

Full Name (Last, First, Middle Initial)

Timothy J. Yehl

Mailing Address 228 E Street NE

City

Washington

State

DC

Zip Code

20002-4923

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MWW Group

Occupation

Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 0 / 2 0 1 0

Transaction ID: 11ai-000031903

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Vernon W. Hill

Mailing Address 262 East Main Street

City

Moorestown

State

NJ

Zip Code

08057-2931

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hill-Townsend Capital

Occupation

Co Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2153.58

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 8 / 2 0 1 0

Transaction ID: 11ai-000032225

Amount of Each Receipt this Period

2153.58

In-Kind: Event Expense

**C.**

Full Name (Last, First, Middle Initial)

Matthew Berzok

Mailing Address 4824 Earlston Drive

City

Bethesda

State

MD

Zip Code

20816-1771

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ryan, MacKinnon, Vasapoli  
& Berzok LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 1 0

Transaction ID: 11ai-000032049

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

5653.58

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 15

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

SHORE PAC

**A.**

Full Name (Last, First, Middle Initial)

Jon S. Corzine

Mailing Address 1500 Hudson Street

City

Hoboken

State

NJ

Zip Code

07030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MF Global Inc

Occupation

Chairman &amp; CEO

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Transaction ID: 11ai-000031996

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) .....

5000.00

TOTAL This Period (last page this line number only) .....

10653.58

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 15

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SHORE PAC

**A.**

Full Name (Last, First, Middle Initial)

Genentech Inc PAC (GenenPAC)

Mailing Address 1399 New York Avenue NW Suite 300

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C**

C00199257

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: 11c-000031777

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

American Medical Association PAC (AMPAC)

Mailing Address 25 Massachusetts Avenue NW Suite 6

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C**

C00000422

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 0 / 2 0 1 0

Transaction ID: 11c-000031904

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

General Electric PAC

Mailing Address 1299 Pennsylvania Avenue NW #1100

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C**

C00024869

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 0 / 2 0 1 0

Transaction ID: 11c-000031905

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 / 15

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
SHORE PAC**A.**

Full Name (Last, First, Middle Initial)

American Hospital Association PAC

Mailing Address 325 Seventh Street NW

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C**

C00106146

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Transaction ID: 11c-000032032

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

American College of Cardiology PAC

Mailing Address 2400 N Street NW

City

Washington

State

DC

Zip Code

20037-1153

FEC ID number of contributing  
federal political committee.**C**

C00375360

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Transaction ID: 11c-000031997

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

American College of Radiology Association

Mailing Address 1891 Preston White Drive

City

Reston

State

VA

Zip Code

20191-4375

FEC ID number of contributing  
federal political committee.**C**

C00343459

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Transaction ID: 11c-000032082

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) .....

9000.00

TOTAL This Period (last page this line number only) .....

19000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SHORE PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey C Carroll

Mailing Address 1102 16th Street South

City State Zip Code  
Arlington VA 22202-1602

Purpose of Disbursement  
Fundraising Services

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

Transaction ID: 21b-02-00352-00352

Date of Disbursement

09 / 01 / 2010

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Alison R Zayas

Mailing Address 415 Newark Street Apt 6b

City State Zip Code  
Hoboken NJ 07030-8421

Purpose of Disbursement  
Fundraising Services

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

Transaction ID: 21b-02-00353-00353

Date of Disbursement

09 / 01 / 2010

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Jodi Woolley

Mailing Address PO Box 4088

City State Zip Code  
Long Branch NJ 07740

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

Transaction ID: 21b-02-00354-00354

Date of Disbursement

09 / 09 / 2010

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional) .....

800.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SHORE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Vernon W Hill

Mailing Address 262 East Main Street

City State Zip Code  
Moorestown NJ 08057

Purpose of Disbursement  
In-Kind: Event Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-00-04768-04768  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

2153.58

**B.**

Full Name (Last, First, Middle Initial)  
Common Sense Consulting

Mailing Address 222 Stony Brook Road

City State Zip Code  
Hopewell NJ 08525

Purpose of Disbursement  
Compliance Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

**Transaction ID:** 21b-02-00372-00372  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2403.58

**TOTAL** This Period (last page this line number only) .....

3203.58

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 15

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
SHORE PAC

A.

Full Name (Last, First, Middle Initial)  
DCCC

Mailing Address 430 South Capitol Street SE

City State Zip Code  
Washington DC 20003

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Annual

Transaction ID: 23-02-00363-00363  
Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 09 29 2010

Amount of Each Disbursement this Period

15000.00

B.

Full Name (Last, First, Middle Initial)  
Friends of Phil Hare

Mailing Address 313 17th Street PO Box 4183

City State Zip Code  
Rock Island IL 61204-4183

Purpose of Disbursement  
Contribution

Candidate Name  
Phil Hare

Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼  
 State: IL District: 17

Transaction ID: 23-02-00362-00362  
Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 09 15 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)  
Bocchieri for Congress

Mailing Address 337 Third Street NW

City State Zip Code  
Canton OH 44702

Purpose of Disbursement  
Contribution

Candidate Name  
John Bocchieri

Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼  
 State: OH District: 16

Transaction ID: 23-02-00371-00371  
Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 09 29 2010

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

17000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SHORE PAC

A.

Full Name (Last, First, Middle Initial)  
Connolly for Congress

Mailing Address PO Box 563

City Merrifield State VA Zip Code 22116

Purpose of Disbursement  
ContributionCandidate Name  
Gerry ConnollyCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District: 11

Transaction ID: 23-02-00370-00370

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)  
Zack Space for Congress

Mailing Address 726 Sixteenth Street NE

City Massillon State OH Zip Code 44646

Purpose of Disbursement  
ContributionCandidate Name  
Zach SpaceCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 18

Transaction ID: 23-02-00364-00364

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)  
Betty Sutton For CongressMailing Address 1700 West Market Street  
Number 155

City Akron State OH Zip Code 44313

Purpose of Disbursement  
ContributionCandidate Name  
Betty SuttonCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 13

Transaction ID: 23-02-00365-00365

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
SHORE PAC

A.

Full Name (Last, First, Middle Initial)  
McNerney for Congress

Mailing Address 6520 Village Parkway, Second Floor

City Dublin State CA Zip Code 94568

Purpose of Disbursement  
ContributionCandidate Name  
Jerry McNerneyCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 11

Transaction ID: 23-02-00366-00366

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00									
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B.

Full Name (Last, First, Middle Initial)  
Kegen 4 CongressMailing Address 100 West College Avenue  
50D

City Appleton State WI Zip Code 54911

Purpose of Disbursement  
ContributionCandidate Name  
Steven KegenCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 08

Transaction ID: 23-02-00367-00367

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00									
---------	--	--	--	--	--	--	--	--	--

C.

Full Name (Last, First, Middle Initial)  
Kathy Dahlkemper For Congress

Mailing Address PO Box 1045

City Erie State PA Zip Code 16512

Purpose of Disbursement  
ContributionCandidate Name  
Kathy DahlkemperCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 08

Transaction ID: 23-02-00368-00368

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00									
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SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
SHORE PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Ed Perlmutter For Congress	<b>Transaction ID:</b> 23-02-00369-00369 <b>Date of Disbursement</b>
Mailing Address 3440 Youngfield Street Number 264	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 1 0</div> </div>
City Wheat Ridge State CO Zip Code 80033	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution Candidate Name Ed Perlmutter Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> <div>1000.00</div> <div>Category/Type</div> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Ed Potosnak For Congress	<b>Transaction ID:</b> 23-02-00373-00373 <b>Date of Disbursement</b>
Mailing Address PO Box 984	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 1 0</div> </div>
City Scotch Plains State NJ Zip Code 07076	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution Candidate Name Ed Potosnak Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> <div>1000.00</div> <div>Category/Type</div> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Adler for Congress	<b>Transaction ID:</b> 23-02-00374-00374 <b>Date of Disbursement</b>
Mailing Address 14 Knightswood Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 1 0</div> </div>
City Marlton State NJ Zip Code 08053-2522	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution Candidate Name John Adler Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> <div>1000.00</div> <div>Category/Type</div> </div>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>3000.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div>26000.00</div>